JUN 2 1 2004

Filing

PTO/SB/01 (08-03) Approved for use through 07/31/2006. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number. Attorney Docket Number A01496A DECLARATION FOR UTILITY OR First Named Inventor James Charles Bohling et **DESIGN** COMPLETE IF KNOWN PATENT APPLICATION (37 CFR 1.63) Application Number Filing Date Declaration Declaration Submitted OR Submitted after Initial Art Unit With Initial Filing (surcharge NYA (37 CFR 1.16 (e))

Filing	(37 CF)	R 1.16 (e)) d)	Examiner N	lame	NYA		
I hereby declare that:	I hereby declare that:						
Each inventor's residence, i	nailing address, a	and citizenship are	as stated b	elow next to t	heir name.		
I believe the inventor(s) nan which a patent is sought on			t inventor(s) of the subjec	t matter wh	ich is claim	ned and for
METHOD OF MANUFACTURING POLYPEPTIDES, INCLUDING T-20 AND T-1249, AT COMMERCIAL SCALE, AND POLYPEPTIDE COMPOSITIONS RELATED THERETO							
		(Title of the	Invention)				
the specification of which							
is attached hereto							
OR			¬			•	
was filed on (MM/DD	MYY)		as Uni	ted States Ap	plication Nu	ımber or P	CT International
Application Number		and was amende	ed on (MM/I	DD/YYYY) [(if applicable).
I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.							
I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.							
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.							
Prior Foreign Application Number(s)	Country	Foreign Filin (MM/DD/Y)		Prior Not Cla		Certified (Yes	Copy Attached? No
]		
Additional foreign appli	cation numbers a	l re listed on a supp	lemental pr	iority data she	et PTO/SB/	/02B attach	ned hereto.

[Page 1 of 2]

[Page 1 of 2]
This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 21 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

PTO/SB/01 (06-03)

Approved for use through 07/31/2003. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION — Utility or Design Patent Application

Direct all correspondence to:	Customer	Number:	2	1898		OR		Corres	pondence address below
Name									
Address	·· ·· - ··								
City				State					ZIP
Country	Τ τ	elephone				Fax			L
Country	'	elephone				' "^			
11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1						4	b _ 4 _ 11	-4-4	
I hereby declare that all statem and belief are believed to be	ients made nerei true: and furth	n of my ow er that the	n knowi se state	eage a ements	are tru	e and t made	nat all with	stateme the kno	owledge that willful false
statements and the like so made	de are punishable	e by fine or	impriso	nment	, or bo	th, und	ler 18 l		
false statements may jeopardiz	e the validity of th	ne application	on or an	y pate	nt issu	ed ther	eon.		
NAME OF SOLE OR FIRST IN	VENTOR:			atition t	nae ha	an filad	for this	e uneia	ned inventor
Given Name				2000111		amily N		o unoigi	ica inventor
(first and middle [if any]) James Charles						r Surna ohling			,
$\overline{}$									I Data
Inventor's Signature	Al	11/	>						Date 09Jm 04
Signature / me	Chance								0 10 20 0 1
Residence: City	State	•		-Count	try			Citize	nship
Lansdale	PA			USA				USA	
Mailing Address									•
1904 Stirling Drive									
City	State				ZIP			ĭ	Country
Lansdale	PA				19446				USA
				Г					
NAME OF SECOND INVENTO	R:				A pe	etition h	as bee	n filed f	for this unsigned inventor
Given Name						mily Na			
(first and middle [if any]) Biwang					Jan.	Surnar	ne		
In and a de	>								Date
Signature Swer	, 3 in	7							06/14/04
Residence: City	State			Count	try			Citize	nship
Warrington	PA			USA				PR Chi	na
Mailing Address									
145 Redstone Drive									
City	State				ZIP			Count	N
-									·· ,
Warrington	PA			1	18976			USA	
Additional inventors or a legal re	presentative are being	named on the	SI	uppleme	ntal shee	et(s) PTC	/SB/02A	or 02LR	attached hereto.

PTO/SB/02A (10-00)
Approved for use through 10/31/2002. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION

ADDITIONAL INVENTOR(S) Supplemental Sheet Page 1

Name of Additional Joint Inventor, if any	y:	A petition has been f	iled for this unsigned inventor	
Given Marlin Kenneth Name Or Surname				
Inventor's Marlin Henneth	Ling	$\overline{}$	Date	
Philadelphia Residence: City	State PA	USA	USA Citizenship	
812 Lombard Street No. 11				
Mailing Address				
Clty Philadelphia	State PA	ZIP 19147	Country USA	
Name of Additional Joint Inventor, if an	y:	A petition has been fi	led for this unsigned inventor	
Given John Joseph Name		Family Name Maikne or Surname	er	
Inventor's Signature Club McCa	7		Date NOT	
Residence: City Quakertown	State PA	Country USA	Citizenship USA	
Mailing Address 1810 Freier Road				
Mailing Address				
City Quakertown	State PA	ZIP 18951	Country USA	
Name of Additional Joint Inventor, if an	y: [A petition has been file	ed for this unsigned inventor	
Given James Franklin Name	1	Family Name Tate, Jr. or Surname		
Inventor & Our Facultin 7	the		Date 6 - 14-04	
New Castle	State DE	Country	USA Citizenship	
Mailing Address 302 Park Avenue				
Mailing Address	· · · · · · · · · · · · · · · · · · ·			
City New Castle	State DE	19720 ZIP	Country	

ه في المح الهندية

PTO/SB/02A (10-00)
Approved for use through 10/31/2002. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION			AD	Suppl	NAL INVENTOR(S) lemental Sheet ge 2 of 2
Name of Additional Joint Inventor, if any: A petition has been filed for this unsigned inventor					
Given William Joseph Name		Far or S	_{mily Name} Zabrods Surname	ki	
Inventor's Signature William Joseph	Zabrodsl	'n			Date 14 Jun 04
Residence: City Lansdale	PA State	Co	USA		USA Citizenship
148 Canterbury Lane		. -			
Mailing Address					
city Lansdale	State PA	ZI	_P 19446	Counti	y USA
Name of Additional Joint Inventor, if any: A petition has been filed for this unsigned inventor					
Given Witold Andrew Name Family Name Ziarno or Surname					
Inventor's Signature			-		0/14/04
Residence: City Chicago	State IL	C	ountry USA		Citizenship USA
Mailing Address 4511 S. St. Louis Avenue					
Mailing Address					
Chicago	State IL	z	11P 60632	Count	y USA
Name of Additional Joint Inventor, if an	y:	A	petition has been file	d for this	s unsigned inventor
Given Family Name Name or Surname					
Inventor's Signature					Date
Residence: City	State		Country		Citizenship
Mailing Address					
Mailing Address					
City	State		ZIP	C	ountry

JUN 2 1 2004 Please type a plus sign (+) inside this box

PTO/SB/81 (02-01)
Approved for use through 10/31/2002. OMB 0651-0035
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it display a valid OMB control number.

POWER OF ATTORNEY OR AUTHORIZATION OF AGENT

Application Number	
Filing Date	
First Named Inventor	James Charles Bohling et al.
Title	Method of Manufacturing Polypeptides, including T-20 and T-1249
Group Art Unit	NYA
Examiner Name	NYA
Attorney Docket Number	DN# A01496A

I hereby appoint:				
OR	Customer Number 21898	⋾→ [Place Customer Number Bar Code Label here	
Practitioner(s) na	amed below:			
	Name	Registrat	ion Number	
	r agent(s) to prosecute the application ide States Patent and Trademark Office conr			
	espondence address for the above-identif			
	ned Customer Number.	ned application i	io.	
OR		1 '	lace Customer	
Practitioners at Cu	stomer Number		lumber Bar Code abel here	
OR Firm or	T			
Individual Name				
Address				
Address		····	1 1	
City	1.5	State	Zip	
Country		ax		
Telephone		ax j		
I am the: Applicant/Invente	or.			
Assignee of reco	ord of the entire interest. See 37 CFR 3.7	1.		
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).				
SIGNATURE of Applicant or Assignee of Record				
Name James Charles Bohling				
Signature Chulz Ro O				
Date 09/Juni 2004				
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple				
forms if more than one signature is required, see below*. *Total of forms are submitted.				

JUN 2 1 2004 Riease type a plus sign (+) inside this box +

PTO/SB/81 (02-01)
Approved for use through 10/31/2002. OMB 0651-0035
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Onder the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it display a valid OMB control number.

POWER OF ATTORNEY OR AUTHORIZATION OF AGENT

Application Number	
Filing Date	
First Named Inventor	James Charles Bohling et al.
Title	Method of Manufacturing Polypeptides, including T-20 and T-1249
Group Art Unit	NYA
Examiner Name	NYA
Attorney Docket Number	DN# A01496A

I hereby appoint:					
OR	Customer Number 21898	Place Customer Number Bar Code Label here			
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Practitioner(s) named below: Name Registration Number				
	Name	Troquetration Training			
	r agent(s) to prosecute the application i States Patent and Trademark Office cor				
	espondence address for the above-iden	ntified application to:			
. —	ned Customer Number.				
OR Practitioners at Cu	stomer Number	Place Customer Number Bar Code			
OR	otomo: Names:	Label here			
Firm or Individual Name		·			
Address					
Address					
City		State Zip			
Country					
Telephone		Fax			
i am the:					
Applicant/Inventor.					
Assignee of record of the entire interest. See 37 CFR 3.71.					
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).					
SIGNATURE of Applicant or Assignee of Record					
Name Biwang Jiang					
Signature Cavay 3 Try					
Date 06/14/04					
NOTE: Signatures of all the inver forms if more than one signature		t or their representative(s) are required. Submit multiple			
★Total of 7 forms are submitted.					

JUN 2 1 2004

Please type a plus sign (+) inside this box

+

PTO/SB/81 (02-01)
Approved for use through 10/31/2002. OMB 0651-0035
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it display a valid OMB control number.

POWER OF ATTORNEY OR AUTHORIZATION OF AGENT

Application Number	
Filing Date	
First Named Inventor	James Charles Bohling et al.
Title	Method of Manufacturing Polypeptides, including T-20 and T-1249
Group Art Unit	NYA
Examiner Name	NYA
Attorney Docket Number	DN# A01496A

I hereby appoint:				
OR	Customer Number 21898	Place Customer Number Bar Code Label here		
Practitioner(s) na		Designation Number		
	Name	Registration Number		
	agent(s) to prosecute the application ide States Patent and Trademark Office conr			
Please change the corre	espondence address for the above-identi	fied application to:		
	ned Customer Number.			
OR Practitioners at Cu	stomer Number	Place Customer Number Bar Code		
OR		Label here		
Firm or Individual Name				
Address				
Address				
City		State Zip		
Country				
Telephone		Fax		
I am the:				
Applicant/Invento	or.			
Assignee of record of the entire interest. See 37 CFR 3.71.				
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).				
SIGNATURE of Applicant or Assignee of Record				
Name Marlin Kenneth Kinzey				
Signature Marle Lenneth Dings				
Date June 9 2004				
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.				
	rms are submitted.			

Please type a plus sign (+) inside this box

PTO/SB/81 (02-01)
Approved for use through 10/31/2002. OMB 0651-0035
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it display a valid OMB control number.

POWER OF ATTORNEY OR AUTHORIZATION OF AGENT

Application Number	
Filing Date	
First Named Inventor	James Charles Bohling et al.
Title	Method of Manufacturing Polypeptides, including T-20 and T-1249
Group Art Unit	NYA
Examiner Name	NYA
Attorney Docket Number	DN# A01496A

I hereby appoint:	· · · · · · · · · · · · · · · · · · ·				
Practitioners at 0 OR Practitioner(s) na	Customer Number 21898	Place Customer Number Bar Code Label here			
	Name	Registration Number			
	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				
	r agent(s) to prosecute the application ide States Patent and Trademark Office conn				
	espondence address for the above-identif	ied application to:			
	ned Customer Number.	Diago Contamos			
OR Practitioners at Cu	stomer Number	Place Customer Number Bar Code			
OR		Label here			
Firm or Individual Name					
Address					
Address					
City	S	itate Zip			
Country					
Telephone	F	ax			
I am the:					
Applicant/Inventor.					
	Assignee of record of the entire interest. See 37 CFR 3.71.				
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).					
SIGNATURE of Applicant or Assignee of Record					
Name John Joseph Maikner					
Signature Whiteen					
Date / by Jens 2007					
NOTE: Signatures of all the inver forms if more than one signature		their representative(s) are required. Submit multiple			
Total of					



Please type a plus sign (+) inside this box

_	\Box
_	+

PTO/SB/81 (02-01)

Approved for use through 10/31/2002 OMB 0651-0035

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it display a valid OMB control number.

POWER OF ATTORNEY OR AUTHORIZATION OF AGENT

Application Number	
Filing Date	
First Named Inventor	James Charles Bohling et al.
Title	Method of Manufacturing Polypeptides, including T-20 and T-1249
Group Art Unit	NYA
Examiner Name	NYA
Attorney Docket Number	DN# A01496A

I hereby appoint:				
Practitioners at 0 OR Practitioner(s) no	Customer Number	21898	<u></u> →	Place Customer Number Bar Code Label here
	Name		Regist	ration Number
	_			
	,			
as my/our attorney(s) o business in the United				
Please change the correspondence address for the above-identified application to: The above-mentioned Customer Number. OR Place Customer Number Bar Code Label here				
OR Firm or				
Individual Name				
Address				
Address			·····	I I
City			State	Zip
Country			- T	
Telephone			Fax	
I am the: Applicant/Invent	or.			
Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).				
SIGNATURE of Applicant or Assignee of Record				
Name James	Franklin Tate, Jr.			
Signature Frankly Set				
Date 6-14-04				
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one/signature is required, see below.				
*Total of				

Please type a plus sign (+) inside this box

PTO/SB/81 (02-01)
Approved for use through 10/31/2002. OMB 0651-0035
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it display a valid OMB control number.

POWER OF ATTORNEY OR AUTHORIZATION OF AGENT

Application Number	
Filing Date	
First Named Inventor	James Charles Bohling et al.
Title	Method of Manufacturing Polypeptides, including T-20 and T-1249
Group Art Unit	NYA
Examiner Name	NYA
Attorney Docket Number	DN# A01496A

I hereby appoint:			
Practitioners at OR Practitioner(s) no	Customer Number 21898	Place Customer Number Bar Code Label here	
	Name	Registration Number	
L			
	r agent(s) to prosecute the application ide States Patent and Trademark Office conn		
	espondence address for the above-identifi	ed application to:	
	ned Customer Number.	Blood Customer	
OR Practitioners at Cu	stomer Number	Place Customer Number Bar Code	
OR		Label here	
Firm or Individual Name			
Address			
Address			
City	S ¹	tate Zip	
Country			
Telephone	ļ F:	ax	
I am the:			
Applicant/Invent	or.		
Assignee of rec	ord of the entire interest. See 37 CFR 3.71	1.	
	Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).		
SIGNATURE of Applicant or Assignee of Record			
Name William Joseph Zabrodski			
Signature William Joseph Zalero Shi			
Date 14 Jun of			
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.			
	orms are submitted.		

Please type a plus sign (+) inside this box PTO/SB/81 (02-01)

Approved for use through 10/31/2002. OMB 0651-0035

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it display a valid OMB control number.

POWER OF ATTORNEY OR AUTHORIZATION OF AGENT

Application Number	
Filing Date	
First Named Inventor	James Charles Bohling et al.
Title	Method of Manufacturing Polypeptides, including T-20 and T-1249
Group Art Unit	NYA
Examiner Name	NYA
Attorney Docket Number	DN# A01496A

I hereby appoint:				
Practitioners at 0 OR Practitioner(s) na	Customer Number 21898	No	ace Customer umber Bar Code abel here	
	Name Registration Number			
	r agent(s) to prosecute the application id States Patent and Trademark Office coni		to transact all	
Please change the corre	espondence address for the above-identi	ied application to:		
	ned Customer Number.			
OR Practitioners at Cus	otomor Number		Customer er Bar Code	
OR	Stomer Number	Label	here	
Firm or			· · · · · · · · · · · · · · · · · · ·	
Individual Name				
Address				
Address City		State	Zip	
Country		olale		
Telephone		ax	· · · · · · · · · · · · · · · · · · ·	
I am the:	•			
Applicant/Invento	or.			
	and of the continuous control of the Control of the continuous control of the con	4		
Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).				
SIGNATURE of Applicant or Assignee of Record				
Witold	Andrew Ziarno	o or riccord		
Name Witold /	Andrew Ziamo			
Signature			<u></u>	
Date 6/1	WDY			
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.				
	rms are submitted.		<u> </u>	